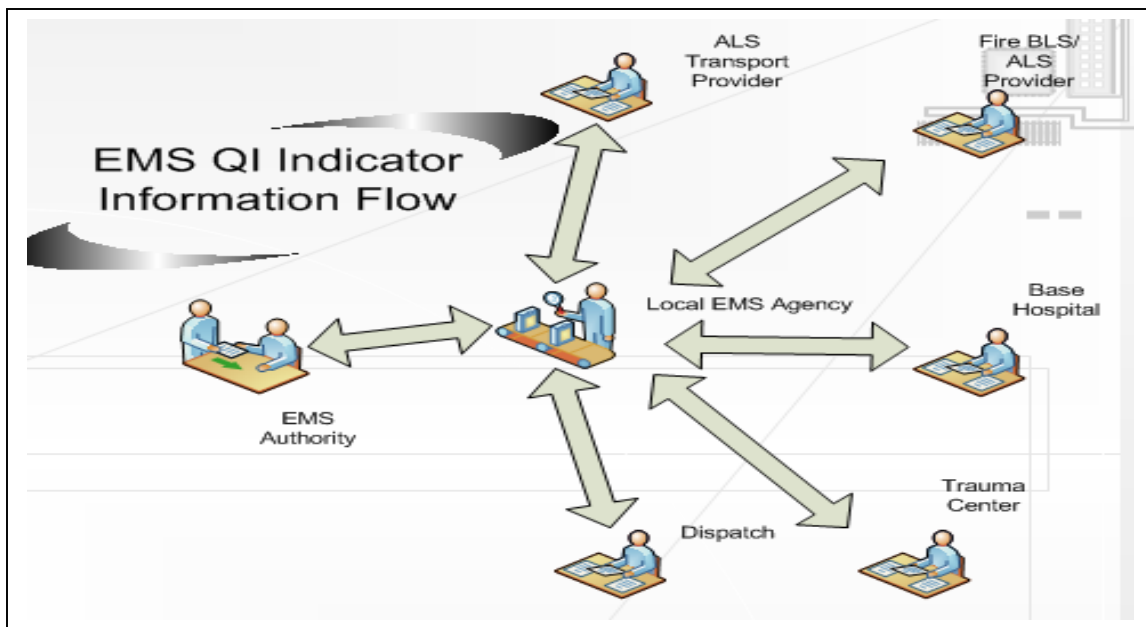


EMS QI Indicator Focus Areas

The 2006 EMSA EQIP Guidelines identify eight QI focus areas for the California State Emergency Medical Services System. These guidelines apply to all Local EMS Agencies, EMS providers and Hospitals. They are to be used to evaluate the quality of emergency medical services we provide. These indicators fall under the following categories:

- Personnel
- Equipment and Supplies
- Documentation
- Clinical Care and Patient Outcome
- Public Education and Prevention
- Risk Management
- Skills Maintenance/Competency
- Transportation/Facilities

As part of this effort the State is working to build consensus around the California EMS Information System (CEMSIS) data elements. These elements will provide the tools needed for standardized objective measures of quality (indicator reports) for the EMS system. Eventually CEMSIS will pull data from each Local EMS Agency provided by EMS providers within the Local EMS Agency's jurisdiction through Electronic Patient Care Record (ePCR) systems to evaluate the State EMS system. Stakeholders in the EMS system have the ability to meet these requirements in a number of different ways. Agencies with electronic data systems will be building data reports using indicators compliant with CEMSIS. This data will flow into local EMS Agency data warehouses and then into the State data system for analysis.



Access to the State data system will be available through protected internet link to all Local EMS Agencies and provider agencies contributing data. Standardized quality indicators are programmed into CEMISIS and will be populated with available data. All participants will have access to a report generator to allow for custom reports. The State is working with the Office of Statewide Health Planning and Development to link emergency department and hospital discharge data with prehospital care data to provide all participants access to patient outcomes.

EMSA and Local EMS Agencies recognize that resources play a role in EMS provider agencies and receiving hospitals ability to participate in this evaluation process. When sufficient resources are not available to allow full implementation of a data driven QI program, as described in the EQIP guidelines, agencies will be able to meet these QI indicator areas, by participating in activities, that achieve objectives consistent with the eight focus areas. This guideline is meant to be a resource to our agencies and hospitals to identify appropriate activities, data indicators, processes and systems that address the eight EQIP focus areas as part of their own individual EMS QI Plan.

It is important to understand that the eight EQIP focus areas are not limited to the evaluation of an agency's quality improvement or training program, rather they address the full spectrum of services and the functions that support the EMS system. Examples of how this would look for agencies with large and small resources are described in the EMS Function Indicator Chart that follows.

Indicator codes correspond to details located in Appendix M of the EMSA Quality Improvement Sample Indicators by the California Vision Group on System Evaluation and Improvement. All EMS function indicator areas do not have to be simultaneously monitored. Function area indicators are chosen by each agency, and should be monitored at appropriate intervals. Each agency has the freedom to choose indicators appropriate to their agency size and resources. Selected indicators should be meaningful and address the need for improvement. All agencies are to regularly participate in the Contra Costa County EMS QI program as part of this process. The following are EXAMPLES of activities, processes, programs and indicators that can meet the eight EQIP focus areas. Policies alone are not evidence of compliance and processes such as site inspections, spot checks and tracking systems should be in place to demonstrate compliance. Documentation of these processes is strongly recommended. Internal policies and procedures supporting these eight EMS QI function areas should be identified in the agency QI Plan and reviewed and revised at appropriate intervals. Agencies can also demonstrate compliance by participating in quality activities where the local EMS agency is able to generate reports utilizing ePCR data warehouses.

EMS FUNCTION INDICATOR AREA	PROVIDERS WITH FULL IMPLEMENTATION E-PCR	PROVIDERS WITH LIMITED IMPLEMENTATION PCR	PROVIDER WITH PAPER PCR	PROVIDERS WITH DISPATCH	BASE AND RECEIVING HOSPITALS
Personnel	WELLNESS WORKLOAD POLICIES AND PROTOCOLS ED1 Education and training indicator A, B (if provider has EMT-1 training school)	WELLNESS WORKLOAD POLICIES AND PROTOCOLS ED1 Education and training indicator A, B (if provider has EMT-1 training school)	WELLNESS WORKLOAD POLICIES AND PROTOCOLS ED1 Education and training indicator A, B (if provider has EMT-1 training school)	WELLNESS WORKLOAD POLICIES AND PROTOCOLS ED1 Education and training indicator A, B (if provider has EMT-1 training school)	WELLNESS WORKLOAD POLICIES AND PROTOCOLS BH1 Base Hospitals-Activity Indicator B-D
Equipment & Supplies	Preventative Maintenance Plans Pharmaceutical inventory control ePCR system infrastructure support IT support policies and resources Mechanisms to deliver ePCR to facilities	Preventative Maintenance Plans Pharmaceutical inventory control ePCR system infrastructure support IT support policies and resources Mechanisms to deliver ePCR to facilities	Preventative Maintenance Plans Pharmaceutical inventory control Mechanisms to deliver ePCR to facilities	Preventative Maintenance Plans Communication coverage protocols IT support policies and resources Contingency plans	Inventory control policies ePCR system infrastructure support (ability to receive and incorporate ePCRs) into patient record

INDICATOR	PROVIDERS WITH FULL IMPLEMENTATION E-PCR	PROVIDERS WITH LIMITED IMPLEMENTATION PCR	PROVIDER WITH PAPER PCR	PROVIDERS WITH DISPATCH	BASE AND RECEIVING HOSPITALS
Clinical Care and Patient Outcome	Policies and monitoring mechanisms regarding: Treatment protocols Committee structure Medical oversight Research EMSA Core Indicators: CA1:A-N, CA2:A-N, CA3:A-J, RE1:A-G, RE2:A-K, QA and Case review	Policies and monitoring mechanisms regarding: Treatment protocols Committee structure Medical oversight Research EMSA Core Indicators: CA1:A-N, CA2:A-N, CA3:A-J, RE1:A-G, RE2:A-K, QA and Case review	Policies and monitoring mechanisms regarding: Treatment protocols Committee structure Medical oversight Research Paper sampling of EMSA Core Indicators: CA1: A-N, CA2:A-N, CA3:A-J, RE1:A-G, RE2:A-K, QA and Case review	Policies and monitoring mechanisms regarding: Treatment protocols Committee structure Medical oversight Research EMSA Core Indicators: CA1: A-N, CA2:A-N, CA3:A-J, RE1:A-G, RE2:A-K, QA and Case review	Policies and monitoring mechanisms regarding: Treatment protocols Committee structure Medical oversight of base activities Research EMSA Core Indicators: CA1: A,B,N, CA2 A,B,N, CA3:J, RE1:G, RE2:K. QA and Case review
Public Education and Prevention	Community involvement. Prevention programs. Patient Education. Customer Satisfaction. EMSA Core Indicators: CA1: A,B CA2 A,B, PP1: A,B Scene observation data elements included in ePCR. Supporting protocols, policies and training.	Community involvement. Prevention programs. Patient Education. Customer Satisfaction. EMSA Core Indicators: CA1:A,B,CA2:A,B, PP1: A,B Scene observation data elements included in ePCR. Supporting protocols, policies and training.	Community involvement. Prevention programs. Patient Education. Customer Satisfaction. Paper sampling of EMSA Core Indicators: CA1:A,B,CA2:A,B, PP1: A,B Supporting protocols, policies and training.	Community involvement. Prevention programs. Patient Education. Customer Satisfaction. EMSA Core Indicators: CA1:A,B,CA2:A,B, PP1: A,B Supporting protocols, policies and training.	Community involvement. Prevention programs. Patient Education. Customer Satisfaction. EMSA Core Indicators: CA1:A,B,CA2:A,B, PP1: A,B Supporting protocols, policies and training.

INDICATOR	PROVIDERS WITH FULL IMPLEMENTATION E-PCR	PROVIDERS WITH LIMITED IMPLEMENTATION PCR	PROVIDER WITH PAPER PCR	PROVIDERS WITH DISPATCH	BASE AND RECEIVING HOSPITALS
Skills Maintenance & Competency	Policies and monitoring mechanisms regarding: Scope of Practice Skills utilization evaluation Infrequent skills Review of success rates (Benchmarking) EMSA Core Indicator SK1: A-J Orientation policies and programs Competency standards and assessments Educational needs assessments/testing Provider improvement plan policies and procedures Performance reviews and HR supporting policies to address remediation	Policies and monitoring mechanisms regarding: Scope of Practice Skills utilization evaluation Infrequent skills Review of success rates (Benchmarking) EMSA Core Indicator SK1: A-J Orientation policies and programs Competency standards and assessments Educational needs assessments/testing Provider improvement plan policies and procedures Performance reviews and HR supporting policies to address remediation	Policies and monitoring mechanisms regarding: Scope of Practice Skills utilization evaluation Infrequent skills Review of success rates (Benchmarking) Paper sampling of EMSA Core Indicator SK1: A-J Orientation policies and programs Competency standards and assessments/testing Educational needs assessments Provider improvement plan policies and procedures Performance reviews and HR supporting policies to address remediation	Policies and monitoring mechanisms regarding: Scope of Practice Skills utilization evaluation Infrequent skills Review of success rates (Benchmarking) EMSA Core Indicator SK1: A-J Orientation policies and programs Competency standards and assessments Educational needs assessments/testing Provider improvement plan policies and procedures Performance reviews and HR supporting policies to address remediation	Policies and monitoring mechanisms regarding: MICN Scope of Practice Skills utilization evaluation and feedback mechanisms Review of success rates (Benchmarking) MICN Orientation policies and programs Competency standards and assessments Educational needs assessments/testing Provider improvement plan policies and procedures Performance reviews and HR supporting policies to address remediation issues.

INDICATOR	PROVIDERS WITH FULL IMPLEMENTATION E-PCR	PROVIDERS WITH LIMITED IMPLEMENTATION PCR	PROVIDER WITH PAPER PCR	PROVIDERS WITH DISPATCH	BASE AND RECEIVING HOSPITALS
Transportation and Facilities	Response times, Wait times, Specialty care center destination policies and procedures EMSA Core Indicators: AC2:A-D if able to collaborate with PSAP. AC3: A-D, EMS Dispatch Center (if able to collaborate with PSAP. RF1:A,B,C,E,. TR1:A-G,I-O Air Transport utilization indicators and/or ePCR data elements	Response times, Wait times, Specialty care center destination policies and procedures EMSA Core Indicators: AC2:A-D if able to collaborate with PSAP. AC3: A-D, EMS Dispatch Center (if able to collaborate with PSAP. RF1:A,B,C,E,. TR1:A-G,I-O Air Transport utilization indicators and/or ePCR data elements	Response times, Wait times, Specialty care center destination policies and procedures Paper sampling of EMSA Core Indicators: AC2:A-D if able to collaborate with PSAP. AC3: A-D, EMS Dispatch Center (if able to collaborate with PSAP. RF1:A,B,C,E,. TR1:A-G,I-O Air transport utilization case review	Response times, Wait times, Specialty care center destination policies and procedures EMSA Core Indicators: AC2:A-D if able to collaborate with PSAP. AC3: A-D, EMS Dispatch Center (if able to collaborate with PSAP. RF1:A,B,C,E,. TR1:A-G,I-O Air transport dispatch protocols	EMSA Core Indicators: BH1: B,C,D RF1: A-E Trauma Centers TH1: A,B TR1: A-G,L-O Off load times Trauma destination review Base destination review Policies and procedures to support above Reddinet communication of trauma and CT diversion Air transport case review

INDICATOR	PROVIDERS WITH FULL IMPLEMENTATION E-PCR	PROVIDERS WITH LIMITED IMPLEMENTATION PCR	PROVIDER WITH PAPER PCR	PROVIDERS WITH DISPATCH	BASE AND RECEIVING HOSPITALS
Documentation	Policies and Procedures in place supporting electronic PCR completion for each patient contact	Policies and Procedures in place supporting PCR completion for each patient contact	Policies and Procedures in place supporting PCR completion for each patient contact	Policies and Procedures in place supporting 911 call documentation for each patient contact	Policies and Procedures in place supporting appropriate documentation completion for each patient contact
	Training, education and compliance monitoring of electronic PCR documentation	Training, education and compliance monitoring of PCR documentation	Training, education and compliance monitoring of PCR documentation	Training, education and compliance monitoring of 911 documentation	Training, education and compliance monitoring of Base contact documentation
	Quality review processes in place for AMA's, Field pronouncements and PCR completion using ePCR data monitoring	Quality review processes in place for AMA's, Field pronouncements and PCR completion using ePCR data.	Quality review processes in place for AMA's, Field pronouncements and PCR completion using call review	Quality review processes in place for 911 call documentation and review	Quality review processes for Base contact documentation completion and wave file review
	Mechanisms in place to identify and track EMS patient documentation	Mechanisms in place to identify and track EMS patient documentation	Mechanisms in place to identify and track EMS patient documentation	Mechanisms in place to identify and track EMS patient calls	Mechanisms in place to identify and track EMS patient documentation
	Documentation of orientation and continuing education in compliance with state and local guidelines				
Patient confidentiality policies and processes in place in compliance with HIPAA					

INDICATOR	PROVIDERS WITH FULL IMPLEMENTATION E-PCR	PROVIDERS WITH LIMITED IMPLEMENTATION PCR	PROVIDER WITH PAPER PCR	PROVIDERS WITH DISPATCH	BASE AND RECEIVING HOSPITALS
Risk Management	Issue resolution process in place				
	Post incident review process in place				
	Compliant with 1798.200 Health and Safety Code reporting requirements				
	Processes in place to assure CAL OSHA required training of providers	Processes in place to assure CAL OSHA required training of providers	Processes in place to assure CAL OSHA required training of providers		Processes in place to support CAL OSHA requirements for prehospital providers
	Internal policies and procedures OSHA compliant	Internal policies and procedures OSHA compliant	Internal policies and procedures OSHA compliant		
	Remediation processes in place to support positive corrections				
	Personnel and patient safety reporting system & monitoring in place				